

Attorney Docket No. 80398.P386

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:)
James J. Carrig) Art Unit: 2613
Serial No.: 09/724740) Examiner: An, S.
Filed: November 28, 2000)
For: Robust Time Domain Block Decoding))


P.O. Box 1450
Alexandria, VA 22313-1450

PAYMENT OF ISSUE FEE

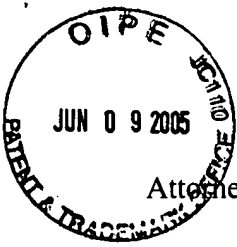
In response to the Notice of Allowance mailed March 18, 2005, enclosed herewith for filing in the above-referenced patent application is a check in the amount of \$1,430.00 for payment of the issue fee and ten (10) soft copies of patent.

Please charge any shortages or credit any overages to our Deposit Account No. 02-2666.

Respectfully submitted,
BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Date: JUNE 6, 2005 
Sheryl Sue Holloway
Reg. No. 37,850

12400 Wilshire Boulevard
Seventh Floor
Los Angeles, CA 90025
(408) 720-8300



Attorney Docket No.: 80398.P386

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

James J. Carrig

Serial No.: 09/724,740

Filed: November 28, 2000

For: Robust Time Domain Block Decoding

P.O. Box 1450

Alexandria, VA 22313-1450

Examiner: An, S.

Art Unit: 2613

COMMENTS ON STATEMENT OF REASONS FOR ALLOWANCE

Applicants are assuming that the Examiner's statement of reasons for allowance is to be taken in light of the structure and interaction recited in the claims. Applicants note that the Examiner's various comments should not be used to read non-existent limitations into the claims.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Date: JUNE 6, 2005

Sheryl Sue Holloway
Reg. No. 37,850

12400 Wilshire Boulevard
Seventh Floor
Los Angeles, CA 90025
(408) 720-8300

FEE TRANSMITTAL FOR FY 2005

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

TOTAL AMOUNT OF PAYMENT (\$) 1430.00

Complete if Known:

Application No. 09/724,740Filing Date 11/28/00First Named Inventor CarrigExaminer Name An, S.Art Unit 2613Attorney Docket No. 80398.P386

Applicant claims small entity status. See 37 CFR 1.27.

METHOD OF PAYMENT (check all that apply)☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify)☐ Deposit AccountDeposit Account Number : 02-2666

Deposit Account Name: _____

☒ The Director is Authorized to do the following with respect to the above-identified Deposit Account:☐ Charge fee(s) indicated below.☒ Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.☐ Charge fee(s) indicated below except for the filing fee☒ Credit any overpayments.☒ Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.

Warning: information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>		<u>Fees Paid (\$)</u>
<u>Code</u>	<u>Fee (\$)</u>	<u>Code</u>	<u>Fee (\$)</u>			
1011	300	2011	150	Utility application filing fee	1,000/500	_____
1111	500	2111	250	Utility search fee		_____
1311	200	2311	100	Utility examination fee		_____
1012	200	2012	100	Design application filing fee	430/215	_____
1112	100	2112	50	Design search fee		_____
1312	130	2312	65	Design examination fee		_____
1013	200	2013	100	Plant filing fee	660/330	_____
1113	300	2113	150	Plant search fee		_____
1313	160	2313	80	Plant examination fee		_____
1004	300	2004	150	Reissue filing fee	1,400/700	_____
1114	500	2114	250	Reissue search fee		_____
1314	600	2314	300	Reissue examination fee		_____
1005	200	2005	100	Provisional application filing fee		_____
SUBTOTAL (1) \$ <u>0</u>						

2. EXCESS CLAIM FEES

		<u>Extra Claims</u>	<u>Fee from below</u>	<u>Fees Paid (\$)</u>
Total Claims	_____ - 20 or HP = _____		X _____	= _____
HP = highest number of total claims paid for, if greater than 20				
Independent Claims	_____ - 3 or HP = _____		X _____	= _____
HP = highest number of independent claims paid for, if greater than 3				
Multiple Dependent Claims			_____	= _____

<u>Large Entity</u>		<u>Small Entity</u>		
Fee Code	Fee (\$)	Fee Code	Fee (\$)	<u>Fee Description</u>
1202	50	2202	25	Each claim over 20
1201	200	2201	100	Each independent claim over 3
1203	360	2203	180	Multiple dependent claims, if not paid
1204	200	2204	100	Reissue: each claim over 20 and more than in the original patent
1205	50	2205	25	Reissue: each independent claim more than in the original patent

SUBTOTAL (2) \$ 0

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each add'l 50 or fraction thereof</u>	<u>Fee from below</u>	<u>Fees paid (\$)</u>
_____	- 100 = _____	/ 50 = _____ (round up to whole number)	X _____	_____

<u>Large Entity</u>		<u>Small Entity</u>		
Fee Code	Fee (\$)	Fee Code	Fee (\$)	<u>Fee Description: Application size fee for each additional group of 50 sheets beyond initial 100 sheets (count spec & drawings except sequences & program listings):</u>
1081	250	2081	125	Utility
1082	250	2082	125	Design
1083	250	2083	125	Plant
1084	250	2084	125	Reissue

SUBTOTAL (3) \$ 0

FEE CALCULATION (continued)**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

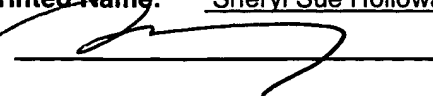
<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1813	8,800	1813	8,800	Request for inter parties reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	500	2452	250	Petition to revive - unavoidable	
1453	1,500	2453	750	Petition to revive - unintentional	
1501	1,400	2501	700	Utility issue fee (or reissue)	1400.00
1502	800	2502	400	Design issue fee	
1503	1100	2503	550	Plant issue fee	
1462	400	1462	400	Petitions to the Commissioner (CFR 1.17(f) Group I)	
1463	200	1463	200	Petitions to the Commissioner (CFR 1.17(g) Group II)	
1464	130	1464	130	Petitions to the Commissioner (CFR 1.17(h) Group III)	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	790	2809	395	For filing a submission after final rejection (see 37 CFR 1.129(a))	
1814	130	2814	65	Statutory Disclaimer	
1810	790	2810	395	For each additional invention to be examined (see 37 CFR 1.129(b))	
1801	790	2801	395	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
1504	300	1504	300	Publication fee for early, voluntary, or normal pub.	
1505	300	1505	300	Publication fee for republication	
1803	130	1803	130	Request for voluntary publication or republication	
1808	130	1808	130	Processing fee under 37 CFR 1.17(i) (except provisionals)	
1454	1,370	1454	1,370	Acceptance of unintentionally delayed claim for priority	

Other fee (specify) Advanced order of soft copies of issued patent (10@3.00 each) 30.00

Other fee (specify) _____

SUBTOTAL (4) \$ 1430.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:Typed or Printed Name: Sheryl Sue HollowaySignature: Date: JUNE 6, 2005Reg. Number: 37,850Telephone Number: 408-720-8300

Send to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450